



Due By April 24, 2009

FD# 97291

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*Off*

# Rhode Island Ethics Commission

## 2008 YEARLY FINANCIAL STATEMENT

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RHODE ISLAND  
ETHICS COMMISSION  
09 APR 27 PM 12:44

JOHN C REVENS JR  
946 CENTERVILLE ROAD  
WARWICK RI 02886-0000

ALL QUESTIONS REFER TO THE CALENDAR YEAR JANUARY 1, 2008 THROUGH DECEMBER 31, 2008  
UNLESS OTHERWISE SPECIFIED.

**PLEASE ANSWER ALL QUESTIONS AND WHERE YOUR ANSWER IS "NONE" OR "NOT APPLICABLE" SO STATE. ANSWERS SHOULD BE PRINTED OR TYPED**, and additional sheets may be used if more space is needed. For clarification of any question, read instruction sheet.

**Note:** If you are a state or municipal official or employee who is required to file a Yearly Financial Statement, a failure to file the Statement is a violation of the law and may subject you to substantial penalties, including fines. If you received a 2008 Yearly Financial Statement in the mail but believe you did not hold a public position in 2008 or 2009 that requires such filing, you should contact the Ethics Commission (See Instruction Sheet for contact information).

1. Revens, Jr. John C.  
NAME OF OFFICIAL (LAST) (FIRST) (INITIAL)

2. 35 Sunny View Court Warwick RI 02886  
HOME ADDRESS (STREET) (CITY/TOWN) (ZIP CODE)

946 Centerville Road, Warwick, Rhode Island 02886

MAILING ADDRESS (if different from home address)

3. List Public Position(s) you hold and governmental unit:

Senator District 31  
(PUBLIC POSITION) (MUNICIPALITY, STATE OR REGIONAL)

(PUBLIC POSITION) (MUNICIPALITY, STATE OR REGIONAL)

I was elected on 1990 I was appointed on \_\_\_\_\_ I was hired on \_\_\_\_\_  
(date) (date) (date)

If you no longer hold a public position, state date of termination or resignation 1/06/09

4. List elected office(s) for which you were/are a candidate in either calendar year 2008 or 2009 (Read instruction #4)

5. List the following: NAME OF SPOUSE  
None

6. List the names of any employer from which you, your spouse, or dependent child received \$1,000 or more gross income during calendar year 2008. If self-employed, list any occupation from which \$1,000 or more gross income was received. If employed by a state or municipal agency, or if self-employed and services were rendered to a state or municipal agency for an amount of income in excess of \$250, list the date and nature of services rendered. If the public position or employment listed in #3, above, provides you with an amount of gross income in excess of \$250 it must be listed here. **(Do Not List Amounts.)**

NAME OF FAMILY MEMBER EMPLOYED	NAME AND ADDRESS OF EMPLOYER OR OCCUPATION	DATES AND NATURE OF SERVICES RENDERED
John C. Revens, Jr.	Revens, Revens & St. Pierre 946 Centerville Road Warwick, RI 02886	01/01/08-12/31/08
John C. Revens, Jr.	946 Centerville Road Warwick, RI 02886	01/01/08-12/31/08 Real Estate Broker

(See Continuation Page)

7. List the address or legal description of any real estate, other than your principal residence, in which you, your spouse, or dependent child had a financial interest.

NAMES	NATURE OF INTEREST	ADDRESS OR DESCRIPTION
John C. Revens, Jr.	Sole Owner	Gardiner Street Narragansett, RI
144 Benefit Street Ass.	Limited Partner	Benefit Street, Providence, RI
John C. Revens, Jr.	Tenant in Common	Green Pine Boulevard West Palm Beach, FL
John C. Revens, Jr.	Partner	Centerville Road Warwick, RI

(See Continuation Page)

8. List the name of any trust, name and address of the trustee of any trust, from which you, your spouse, or dependent child or children individually received \$1,000 or more gross income. List assets if known. **(Do Not List Amounts.)**

NAME OF TRUST: None

NAME OF TRUSTEE AND ADDRESS: \_\_\_\_\_

NAME OF FAMILY MEMBER RECEIVING TRUST INCOME: \_\_\_\_\_

ASSETS: \_\_\_\_\_

9. List the name and address of any business organization or other entity, whether for profit or non-profit, in which you, your spouse, or dependent child held a position as a director, officer, partner, trustee, or a management position.

NAME OF FAMILY MEMBER	NAME AND ADDRESS OF BUSINESS	POSITION
John C. Revens, Jr.	Revens, Revens & St. Pierre 946 Centerville Road Warwick, RI	President
John C. Revens, Jr.	R&D Realty Co. 946 Centerville Road Warwick, RI	President

(See Continuation Page)

**6. (Continued)**

John C. Revens, Jr.	State of Rhode Island State Capitol Providence, RI	01/01/08 – 12/31/08 Senator
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**7. (Continued)**

John C. Revens, Jr.	Partner	Smithboro Properties, LLC Division Street Warwick, RI
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John C. Revens, Jr.	Partner	KND Development, LLC Warwick Neck Avenue Warwick, RI
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**9. (Continued)**

John C. Revens, Jr.	State Legislative Leaders Foundation 1645 Falmouth Road Centerville, MA	Director
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John C. Revens, Jr.	946 Centerville Road Warwick, RI	Self-Employed Real Estate Broker
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John C. Revens, Jr.	144 Benefit Street Associates 144 Benefit Street Providence, RI	Limited Partner
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John C. Revens, Jr.	RI Academic Decathlon Ass. Warwick, RI	Director
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John C. Revens, Jr.	Senate President's Forum 66 Witherspoon Street, #226 Princeton, NJ	Director
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John C. Revens, Jr.	Smithboro Properties, LLC 946 Centerville Road Warwick, RI	Director
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John C. Revens, Jr.	KND Development, LLC 946 Centerville Road Warwick, RI	Partner
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**11. (Continued)**

John C. Revens, Jr.	Vanguard Windsor Fund Investor Share P.O. Box 2600 Valley Forge, PA 19482-2600
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John C. Revens, Jr.	Law Enforcement Associates Corporation 100 Hunter Place Youngsville, NC 27596
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John C. Revens, Jr.	Smithboro Properties, LLC Division Street Warwick, RI
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John C. Revens, Jr.	KND Development, LLC Warwick Neck Avenue Warwick, RI
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10. List the name and address of any interested person, or business entity, that made total gifts or total contributions in excess of \$100 in cash or property during calendar year 2008 to you, your spouse, or dependent child. Certain gifts from relatives and certain campaign contributions are excluded. (See instruction #10)

NAME OF PERSON RECEIVING GIFT OR CONTRIBUTION	NAME AND ADDRESS OF PERSON OR ENTITY MAKING GIFT OR CONTRIBUTION
John C. Revens, Jr.	Directors and Members are reimbursed for transportation, lodging and meals when attending meetings of the organization.  SGAC Leaders Policy Conference State Legislative Leaders Foundation Senate Presidents' Forum

11. List the name and address of any business in which you, your spouse, or dependent child individually or collectively holds a 10% or greater ownership interest, or a \$5,000 or greater ownership or investment interest.

NAME OF FAMILY MEMBER	NAME AND ADDRESS OF BUSINESS
John C. Revens, Jr.	144 Benefit Street Associates - 144 Benefit Street, Providence, RI
John C. Revens, Jr.	Revens, Revens & St. Pierre - 946 Centerville Road, Warwick, RI
John C. Revens, Jr.	R&D Realty Co. - 946 Centerville Road, Warwick, RI
John C. Revens, Jr.	946 Centerville Road, Warwick, RI - Self-Employed real estate broker
John C. Revens, Jr.	Keycorp Stock, 127 Public Square, Cleveland, Ohio 44114
John C. Revens, Jr.	Law Enforcement Ass. Corp., 100 Hunter Place, Youngsville, NC
John C. Revens, Jr.	Vanguard Windsor Fund Investor Share, P.O. Box 2600, Valley Forge, PA
John C. Revens, Jr.	Cowesett JV, LLC, 1281 East Main Street, Stamford, CT 06902
John C. Revens, Jr.	Dodge & Cox Fund, c/o Boston Financial Services, P.O. Box 8422, Boston, MA 02266

(See Continuation Page)

12. If any business listed in #11, above, did business in excess of a total of \$250 in calendar year 2008 with a state or municipal agency, **AND** you are a member or employee of the agency or exercise direct or legislative control over the agency, list the following:

NAME AND ADDRESS OF BUSINESS	NAME OF AGENCY	DATE AND NATURE OF TRANSACTION
Revens, Revens & St. Pierre	RI Public Transit Authority	01/01/08-12/31/08 Legal Work

13. If any business listed in #11, above, was a business entity subject to direct regulation by a state or municipal agency, **AND** you are a member or employee of the agency or exercise direct or legislative control over the agency, list the following:

NAME AND ADDRESS OF BUSINESS	NAME OF REGULATING AGENCY
None	

14. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a \$5,000 or greater ownership or investment interest in a business after January 1, 2009 and before the date you file this statement **AND** if said business was regulated by a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS OF BUSINESS

None

DESCRIPTION OF INTEREST (NOT AMOUNT)  
AND DATE ACQUIRED AND/OR DIVESTED

NAME OF REGULATING AGENCY

HOW REGULATED

15. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a \$5,000 or greater ownership or investment interest in a business after January 1, 2009 and before the date you file this statement, which did business in excess of \$250 with a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS  
OF BUSINESS

DESCRIPTION OF INTEREST  
DATE ACQUIRED AND/OR DIVESTED  
(DO NOT INCLUDE AMOUNT)

NAME OF STATE  
OR MUNICIPAL AGENCY

None

16. If you, your spouse or dependent child were indebted in an amount in excess of \$1,000 to any person, business entity or other organization other than (i) any person related to you, your spouse or dependent child at any time within the third degree of consanguinity, or (ii) a financial institution regulated by any state or by the United States where such indebtedness is secured solely by a mortgage of record on real property used exclusively as your principal residence, or (iii) any indebtedness arising from transactions involving credit cards, please list the following:

NAME AND ADDRESS OF DEBTOR

NAME AND ADDRESS OF LENDER

John C. Revens, Jr.  
35 Sunny View Court  
Warwick, RI 02886

Washington Trust Company  
20 Point Judith Road  
Narragansett, RI 02882

I certify under penalty of perjury, that this Financial Statement is a complete and accurate response to the questions presented as to the financial information and interests during the year 2008 of myself, my spouse, and my dependent children. I acknowledge that I may request an advisory opinion from the Ethics Commission as to my conduct under the Code of Ethics. I understand that a copy of the Code of Ethics will be provided to me at no cost upon request by contacting the Ethics Commission.

State of Rhode Island  
County of Kent

  
SIGNATURE

Subscribed and sworn to before me at Warwick, RI this 23rd day of April, 2009.

My Commission expires: 3/27/2010

  
SIGNATURE OF NOTARY PUBLIC

**THIS STATEMENT WILL BE RETURNED IF IT IS NOT SIGNED AND NOTARIZED AND IF ANY QUESTION IS NOT ANSWERED.**